

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

CON-WAY INC. POLITICAL ACTION COMMITTEE

ADDRESS (number and street)

2855 Campus Drive

Check if different  
than previously  
reported. (ACC)

Suite 300

San Mateo

CA

94403

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00110759

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☐January 31  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☒

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE**-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post**-Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

07

01

2008

through

07

31

2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Mark Thickpenny

Signature of Treasurer

Electronically Filed by Mark Thickpenny

Date

08

18

2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
CON-WAY INC. POLITICAL ACTION COMMITTEE

Report Covering the Period: From: 

|   |   |
|---|---|
| M | M |
| 0 | 7 |

|   |   |
|---|---|
| D | D |
| 0 | 1 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 8 |

 To: 

|   |   |
|---|---|
| M | M |
| 0 | 7 |

|   |   |
|---|---|
| D | D |
| 3 | 1 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 8 |

|   | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand<br>January 1  |                         | 35099.59                          |
| (b) Cash on Hand at<br>Beginning of Reporting Period .....  | 29012.11                |                                   |
| (c) Total Receipts (from Line 19) .....   | 4093.49                 | 37506.01                          |
| (d) Subtotal (add lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B) .....      | 33105.60                | 72605.60                          |
| 7. Total Disbursements (from Line 31) .....   | 3000.00                 | 42500.00                          |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)) .....                 | 30105.60                | 30105.60                          |
| 9. Debts and Obligations owed TO<br>the committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | 0.00                    |                                   |
| 10. Debts and Obligations owed BY<br>the committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | 0.00                    |                                   |

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

CON-WAY INC. POLITICAL ACTION COMMITTEE

Report Covering the Period:

From:

|   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|
| M | M | D | D | Y | Y | Y | Y |
| 0 | 7 | 0 | 1 | 2 | 0 | 0 | 8 |

To:

|   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|
| M | M | D | D | Y | Y | Y | Y |
| 0 | 7 | 3 | 1 | 2 | 0 | 0 | 8 |

| I. Receipts  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:   |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees  | 3427.28                       | 24524.62                          |
| (i) Itemized (use Schedule A) .....  |                               |                                   |
| (ii) Unitemized .....  | 664.72                        | 12945.95                          |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ➡   | 4092.00                       | 37470.57                          |
| (b) Political Party Committees .....   | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs) .....  | 0.00                          | 0.00                              |
| (d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ..... ➡  | 4092.00                       | 37470.57                          |
| 12. Transfers From Affiliated/Other Party Committees .....   | 0.00                          | 0.00                              |
| 13. All Loans Received .....   | 0.00                          | 0.00                              |
| 14. Loan Repayments Received .....   | 0.00                          | 0.00                              |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) ..... | 0.00                          | 0.00                              |
| 16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....           | 0.00                          | 0.00                              |
| 17. Other Federal Receipts (Dividends, Interest, etc.) .....   | 1.49                          | 35.44                             |
| 18. Transfers from Non-Federal and Levin Funds   |                               |                                   |
| (a) Non-Federal Account (from Schedule H3) .....   | 0.00                          | 0.00                              |
| (b) Levin Funds (from Schedule H5) .....   | 0.00                          | 0.00                              |
| (c) Total Transfer (add 18(a) and 18(b)).  | 0.00                          | 0.00                              |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....                          | 4093.49                       | 37506.01                          |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....                                    | 4093.49                       | 37506.01                          |

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| II. DISBURSEMENTS  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures:  |                               |                                   |
| (a) Shared Federal/Non-Federal Activity (from Schedule H4)                                     | 0.00                          | 0.00                              |
| (i) Federal Share.....   |                               |                                   |
| (ii) Non-Federal Share.....  | 0.00                          | 0.00                              |
| (b) Other Federal Operating Expenditures.....  | 0.00                          | 0.00                              |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡                        | 0.00                          | 0.00                              |
| 22. Transfers to Affiliated/Other Party Committees.....  | 0.00                          | 0.00                              |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 3000.00                       | 42500.00                          |
| 24. Independent Expenditure (use Schedule E) .....   | 0.00                          | 0.00                              |
| 25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)..... | 0.00                          | 0.00                              |
| 26. Loan Repayments Made.....  | 0.00                          | 0.00                              |
| 27. Loans Made.....  | 0.00                          | 0.00                              |
| 28. Refunds of Contributions To:   |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees .....                                  | 0.00                          | 0.00                              |
| (b) Political Party Committees .....   | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs) .....  | 0.00                          | 0.00                              |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....                           | 0.00                          | 0.00                              |
| 29. Other Disbursements.....   | 0.00                          | 0.00                              |
| 30. Federal Election Activity (2 U.S.C 431(20))  |                               |                                   |
| (a) Shared Federal Election Activity (from Schedule H6)  |                               |                                   |
| (i) Federal Share .....  | 0.00                          | 0.00                              |
| (ii) "Levin" Share .....   | 0.00                          | 0.00                              |
| (b) Federal Election Activity Paid Entirely With Federal Funds .....                           | 0.00                          | 0.00                              |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....              | 0.00                          | 0.00                              |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..       | 3000.00                       | 42500.00                          |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 3000.00                       | 42500.00                          |

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures                                       | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans)<br>from Line 11(d), page 3) .....        | 4092.00                       | 37470.57                          |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                           | 0.00                          | 0.00                              |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....   | 4092.00                       | 37470.57                          |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b))..... | 0.00                          | 0.00                              |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3) .....               | 0.00                          | 0.00                              |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....             | 0.00                          | 0.00                              |

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 66

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Jacquelyn A. Barretta

Mailing Address 1309 SE 57th

City

Portland

State

OR

Zip Code

97215

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CNF Service Co.

Occupation  
VP & CIO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.14057

Amount of Each Receipt this Period

10.00

Payroll Deduction

**B.**

Full Name (Last, First, Middle Initial)

Jacquelyn A. Barretta

Mailing Address 1309 SE 57th

City

Portland

State

OR

Zip Code

97215

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CNF Service Co.

Occupation  
VP & CIO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 2 / 2 0 0 8

Transaction ID: SA11AI.14161

Amount of Each Receipt this Period

10.00

Payroll Deduction

**C.**

Full Name (Last, First, Middle Initial)

Jacquelyn A. Barretta

Mailing Address 1309 SE 57th

City

Portland

State

OR

Zip Code

97215

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CNF Service Co.

Occupation  
VP & CIO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.14260

Amount of Each Receipt this Period

10.00

Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional) .....

30.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 66

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Jacquelyn A. Barretta

Mailing Address 1309 SE 57th

City

Portland

State

OR

Zip Code

97215

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CNF Service Co.

Occupation  
VP & CIO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.14359

Amount of Each Receipt this Period

10.00

Payroll Deduction

**B.**

Full Name (Last, First, Middle Initial)

Paul B. Berg

Mailing Address 1615 Forest Creek Dr.

City

Blue Bell

State

PA

Zip Code

19422

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Central Express

Occupation  
Regional Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.14064

Amount of Each Receipt this Period

15.00

Payroll Deduction

**C.**

Full Name (Last, First, Middle Initial)

Paul B. Berg

Mailing Address 1615 Forest Creek Dr.

City

Blue Bell

State

PA

Zip Code

19422

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Central Express

Occupation  
Regional Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.14267

Amount of Each Receipt this Period

15.00

Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional) .....

40.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 66

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Paul B. Berg

Mailing Address 1615 Forest Creek Dr.

City

Blue Bell

State

PA

Zip Code

19422

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Central Express

Occupation

Regional Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 2 / 2 0 0 8

Transaction ID: SA11AI.14168

Amount of Each Receipt this Period

15.00

Payroll Deduction

**B.**

Full Name (Last, First, Middle Initial)

Paul B. Berg

Mailing Address 1615 Forest Creek Dr.

City

Blue Bell

State

PA

Zip Code

19422

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Central Express

Occupation

Regional Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.14366

Amount of Each Receipt this Period

15.00

Payroll Deduction

**C.**

Full Name (Last, First, Middle Initial)

Mr. Adam A. Berkowitz

Mailing Address 130 Challenge Rd.

City

Raleigh

State

NC

Zip Code

27603

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Menlo Logistics

Occupation

Sr. Logistics Mgr.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.14121

Amount of Each Receipt this Period

10.00

Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional) .....

40.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 66

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Mr. Adam A. Berkowitz

Mailing Address 130 Challenge Rd.

City

Raleigh

State

NC

Zip Code

27603

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Menlo Logistics

Occupation

Sr. Logistics Mgr.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 2 / 2 0 0 8

Transaction ID: SA11AI.14225

Amount of Each Receipt this Period

10.00

Payroll Deduction

**B.**

Full Name (Last, First, Middle Initial)

Mr. Adam A. Berkowitz

Mailing Address 130 Challenge Rd.

City

Raleigh

State

NC

Zip Code

27603

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Menlo Logistics

Occupation

Sr. Logistics Mgr.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.14324

Amount of Each Receipt this Period

10.00

Payroll Deduction

**C.**

Full Name (Last, First, Middle Initial)

Mr. Adam A. Berkowitz

Mailing Address 130 Challenge Rd.

City

Raleigh

State

NC

Zip Code

27603

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Menlo Logistics

Occupation

Sr. Logistics Mgr.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.14423

Amount of Each Receipt this Period

10.00

Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional) .....

30.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 66

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

James R. Bethell

Mailing Address 18 Norwood Street

City

Albany

State

NY

Zip Code

12203

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Central Express

Occupation

Mgr. Freight Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.14065

Amount of Each Receipt this Period

10.00

Payroll Deduction

**B.**

Full Name (Last, First, Middle Initial)

James R. Bethell

Mailing Address 18 Norwood Street

City

Albany

State

NY

Zip Code

12203

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Central Express

Occupation

Mgr. Freight Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 2 / 2 0 0 8

Transaction ID: SA11AI.14169

Amount of Each Receipt this Period

10.00

Payroll Deduction

**C.**

Full Name (Last, First, Middle Initial)

James R. Bethell

Mailing Address 18 Norwood Street

City

Albany

State

NY

Zip Code

12203

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Central Express

Occupation

Mgr. Freight Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.14268

Amount of Each Receipt this Period

10.00

Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional) .....

30.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 66

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

James R. Bethell

Mailing Address 18 Norwood Street

City

Albany

State

NY

Zip Code

12203

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Central Express

Occupation

Mgr. Freight Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.14367

Amount of Each Receipt this Period

10.00

Payroll Deduction

**B.**

Full Name (Last, First, Middle Initial)

Craig Boretz

Mailing Address 922 NW 11th Avenue

City

Portland

State

OR

Zip Code

97209

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CNF Service Co.

Occupation

VP Tax Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.14058

Amount of Each Receipt this Period

20.00

Payroll Deduction

**C.**

Full Name (Last, First, Middle Initial)

Craig Boretz

Mailing Address 922 NW 11th Avenue

City

Portland

State

OR

Zip Code

97209

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CNF Service Co.

Occupation

VP Tax Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

660.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 2 / 2 0 0 8

Transaction ID: SA11AI.14162

Amount of Each Receipt this Period

20.00

Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional) .....

50.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 66

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Craig Boretz

Mailing Address 922 NW 11th Avenue

City

Portland

State

OR

Zip Code

97209

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CNF Service Co.

Occupation

VP Tax Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

680.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.14261

Amount of Each Receipt this Period

20.00

Payroll Deduction

**B.**

Full Name (Last, First, Middle Initial)

Craig Boretz

Mailing Address 922 NW 11th Avenue

City

Portland

State

OR

Zip Code

97209

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CNF Service Co.

Occupation

VP Tax Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.14360

Amount of Each Receipt this Period

20.00

Payroll Deduction

**C.**

Full Name (Last, First, Middle Initial)

Lawrence R. Bowen

Mailing Address 2014 N. Forest Ct.

City

Canby

State

OR

Zip Code

97013

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CNF Service Co.

Occupation

Mgr. Claims

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.14059

Amount of Each Receipt this Period

10.00

Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional) .....

50.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 66

(check only one)

|   |                              |                              |                             |                             |                             |                             |                             |                             |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Lawrence R. Bowen

Mailing Address 2014 N. Forest Ct.

City

Canby

State

OR

Zip Code

97013

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CNF Service Co.

Occupation

Mgr. Claims

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 2 |   | 2 | 0 | 0 | 8 |

Transaction ID: SA11AI.14163

Amount of Each Receipt this Period

10.00

Payroll Deduction

**B.**

Full Name (Last, First, Middle Initial)

Lawrence R. Bowen

Mailing Address 2014 N. Forest Ct.

City

Canby

State

OR

Zip Code

97013

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CNF Service Co.

Occupation

Mgr. Claims

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 9 |   | 2 | 0 | 0 | 8 |

Transaction ID: SA11AI.14262

Amount of Each Receipt this Period

10.00

Payroll Deduction

**C.**

Full Name (Last, First, Middle Initial)

Lawrence R. Bowen

Mailing Address 2014 N. Forest Ct.

City

Canby

State

OR

Zip Code

97013

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CNF Service Co.

Occupation

Mgr. Claims

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 2 | 6 |   | 2 | 0 | 0 | 8 |

Transaction ID: SA11AI.14361

Amount of Each Receipt this Period

10.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional) .....

30.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 66

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Mr. Keith W. Burnett

Mailing Address 3217 Birch Avenue

City

Grapevine

State

TX

Zip Code

76051

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transportation Se-  
rvice

Occupation

VP Admin Services CTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1102.98

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.14069

Amount of Each Receipt this Period

35.58

Payroll Deduction

**B.**

Full Name (Last, First, Middle Initial)

Mr. Keith W. Burnett

Mailing Address 3217 Birch Avenue

City

Grapevine

State

TX

Zip Code

76051

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transportation Se-  
rvice

Occupation

VP Admin Services CTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1138.56

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 2 / 2 0 0 8

Transaction ID: SA11AI.14173

Amount of Each Receipt this Period

35.58

Payroll Deduction

**C.**

Full Name (Last, First, Middle Initial)

Mr. Keith W. Burnett

Mailing Address 3217 Birch Avenue

City

Grapevine

State

TX

Zip Code

76051

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transportation Se-  
rvice

Occupation

VP Admin Services CTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1174.14

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.14272

Amount of Each Receipt this Period

35.58

Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional) .....

106.74

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 66

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Mr. Keith W. Burnett

Mailing Address 3217 Birch Avenue

City

Grapevine

State

TX

Zip Code

76051

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transportation Se-  
rvice

Occupation

VP Admin Services CTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1209.72

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.14371

Amount of Each Receipt this Period

35.58

Payroll Deduction

**B.**

Full Name (Last, First, Middle Initial)

Mr. Kevin S. Coel

Mailing Address 17686 NW Country Dr.

City

Portland

State

OR

Zip Code

97229

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CNF Service Co.

Occupation

VP Controller

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.14060

Amount of Each Receipt this Period

10.00

Payroll Deduction

**C.**

Full Name (Last, First, Middle Initial)

Mr. Kevin S. Coel

Mailing Address 17686 NW Country Dr.

City

Portland

State

OR

Zip Code

97229

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CNF Service Co.

Occupation

VP Controller

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 2 / 2 0 0 8

Transaction ID: SA11AI.14164

Amount of Each Receipt this Period

10.00

Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional) .....

55.58

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 66

(check only one)

|   |                              |                              |                             |                             |                             |                             |                             |                             |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Mr. Kevin S. Coel

Mailing Address 17686 NW Country Dr.

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Portland | OR    | 97229    |

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CNF Service Co.Occupation  
VP Controller

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 | / | 1 | 9 | / | 2 | 0 | 0 | 8 |

Transaction ID: SA11AI.14263

Amount of Each Receipt this Period

10.00

Payroll Deduction

**B.**

Full Name (Last, First, Middle Initial)

Mr. Kevin S. Coel

Mailing Address 17686 NW Country Dr.

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Portland | OR    | 97229    |

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CNF Service Co.Occupation  
VP Controller

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 | / | 2 | 6 | / | 2 | 0 | 0 | 8 |

Transaction ID: SA11AI.14362

Amount of Each Receipt this Period

10.00

Payroll Deduction

**C.**

Full Name (Last, First, Middle Initial)

Robert E. Corbett

Mailing Address 208 North Checkerberry

|              |       |          |
|--------------|-------|----------|
| City         | State | Zip Code |
| Jacksonville | FL    | 32259    |

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CTSOccupation  
Mgr. Region

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 | / | 0 | 5 | / | 2 | 0 | 0 | 8 |

Transaction ID: SA11AI.14072

Amount of Each Receipt this Period

10.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional) .....

30.00

TOTAL This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 66

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Robert E. Corbett

Mailing Address 208 North Checkerberry

City

Jacksonville

State

FL

Zip Code

32259

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CTS

Occupation

Mgr. Region

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 2 / 2 0 0 8

Transaction ID: SA11AI.14176

Amount of Each Receipt this Period

10.00

Payroll Deduction

**B.**

Full Name (Last, First, Middle Initial)

Robert E. Corbett

Mailing Address 208 North Checkerberry

City

Jacksonville

State

FL

Zip Code

32259

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CTS

Occupation

Mgr. Region

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.14275

Amount of Each Receipt this Period

10.00

Payroll Deduction

**C.**

Full Name (Last, First, Middle Initial)

Robert E. Corbett

Mailing Address 208 North Checkerberry

City

Jacksonville

State

FL

Zip Code

32259

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CTS

Occupation

Mgr. Region

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.14374

Amount of Each Receipt this Period

10.00

Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional) .....

30.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 66

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Karl A. Cushey

Mailing Address 10080 Glynwater Court

City

State

Zip Code

Granger

IN

46530

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transp. Svcs.

Occupation

Service Center Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

763.15

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.14074

Amount of Each Receipt this Period

24.00

Payroll Deduction

**B.**

Full Name (Last, First, Middle Initial)

Karl A. Cushey

Mailing Address 10080 Glynwater Court

City

State

Zip Code

Granger

IN

46530

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transp. Svcs.

Occupation

Service Center Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

787.15

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 2 / 2 0 0 8

Transaction ID: SA11AI.14178

Amount of Each Receipt this Period

24.00

Payroll Deduction

**C.**

Full Name (Last, First, Middle Initial)

Karl A. Cushey

Mailing Address 10080 Glynwater Court

City

State

Zip Code

Granger

IN

46530

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transp. Svcs.

Occupation

Service Center Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

811.15

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.14277

Amount of Each Receipt this Period

24.00

Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional) .....

72.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 66

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Karl A. Cushey

Mailing Address 10080 Glynwater Court

City State Zip Code  
 Granger IN 46530

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Con-Way Transp. Svcs.

Occupation  
Service Center Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

835.15

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 7 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.14376

Amount of Each Receipt this Period

24.00

Payroll Deduction

**B.**

Full Name (Last, First, Middle Initial)

Scott Engers

Mailing Address 1621 Knight Road

City State Zip Code  
 Ann Arbor MI 48103

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Con-Way Transportation Se-  
rvices

Occupation  
VP Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 7 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.14078

Amount of Each Receipt this Period

25.00

Payroll Deduction

**C.**

Full Name (Last, First, Middle Initial)

Scott Engers

Mailing Address 1621 Knight Road

City State Zip Code  
 Ann Arbor MI 48103

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Con-Way Transportation Se-  
rvices

Occupation  
VP Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

825.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 7 / 1 2 / 2 0 0 8

Transaction ID: SA11AI.14182

Amount of Each Receipt this Period

25.00

Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional) .....

74.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 66

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Scott Engers

Mailing Address 1621 Knight Road

City

Ann Arbor

State

MI

Zip Code

48103

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transportation Se-  
rvices

Occupation

VP Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.14281

Amount of Each Receipt this Period

25.00

Payroll Deduction

**B.**

Full Name (Last, First, Middle Initial)

Scott Engers

Mailing Address 1621 Knight Road

City

Ann Arbor

State

MI

Zip Code

48103

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transportation Se-  
rvices

Occupation

VP Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

875.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.14380

Amount of Each Receipt this Period

25.00

Payroll Deduction

**C.**

Full Name (Last, First, Middle Initial)

Don Feghtly

Mailing Address 4587 Cameron Circle

City

Dexter

State

MI

Zip Code

48130

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way NOW

Occupation

Director-Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.14079

Amount of Each Receipt this Period

10.00

Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional) .....

60.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 66

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Don Fegtlly

Mailing Address 4587 Cameron Circle

City

State

Zip Code

Dexter

MI

48130

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way NOW

Occupation

Director-Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 2 / 2 0 0 8

Transaction ID: SA11AI.14183

Amount of Each Receipt this Period

10.00

Payroll Deduction

**B.**

Full Name (Last, First, Middle Initial)

Don Fegtlly

Mailing Address 4587 Cameron Circle

City

State

Zip Code

Dexter

MI

48130

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way NOW

Occupation

Director-Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.14282

Amount of Each Receipt this Period

10.00

Payroll Deduction

**C.**

Full Name (Last, First, Middle Initial)

Don Fegtlly

Mailing Address 4587 Cameron Circle

City

State

Zip Code

Dexter

MI

48130

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way NOW

Occupation

Director-Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.14381

Amount of Each Receipt this Period

10.00

Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional) .....

30.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 66

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

James P. Gray

Mailing Address 24011 Cormorant Lane

City

Laguna Niguel

State

CA

Zip Code

92677

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CWX

Occupation  
Exec. VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.14082

Amount of Each Receipt this Period

10.00

Payroll Deduction

**B.**

Full Name (Last, First, Middle Initial)

James P. Gray

Mailing Address 24011 Cormorant Lane

City

Laguna Niguel

State

CA

Zip Code

92677

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CWX

Occupation  
Exec. VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 2 / 2 0 0 8

Transaction ID: SA11AI.14186

Amount of Each Receipt this Period

10.00

Payroll Deduction

**C.**

Full Name (Last, First, Middle Initial)

James P. Gray

Mailing Address 24011 Cormorant Lane

City

Laguna Niguel

State

CA

Zip Code

92677

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CWX

Occupation  
Exec. VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.14285

Amount of Each Receipt this Period

10.00

Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional) .....

30.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 66

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

James P. Gray

Mailing Address 24011 Cormorant Lane

City

Laguna Niguel

State

CA

Zip Code

92677

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CWX

Occupation  
Exec. VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.14384

Amount of Each Receipt this Period

10.00

Payroll Deduction

**B.**

Full Name (Last, First, Middle Initial)

Richard Grill

Mailing Address 2207 Snapdragon Rd

City

Naperville

State

IL

Zip Code

60564

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transportation Se-  
rvices

Occupation  
Regional Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.14083

Amount of Each Receipt this Period

10.00

Payroll Deduction

**C.**

Full Name (Last, First, Middle Initial)

Richard Grill

Mailing Address 2207 Snapdragon Rd

City

Naperville

State

IL

Zip Code

60564

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transportation Se-  
rvices

Occupation  
Regional Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 2 / 2 0 0 8

Transaction ID: SA11AI.14187

Amount of Each Receipt this Period

10.00

Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional) .....

30.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 66

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Richard Grill

Mailing Address 2207 Snapdragon Rd

City

Naperville

State

IL

Zip Code

60564

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transportation Se-  
rvices

Occupation

Regional Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.14286

Amount of Each Receipt this Period

10.00

Payroll Deduction

**B.**

Full Name (Last, First, Middle Initial)

Richard Grill

Mailing Address 2207 Snapdragon Rd

City

Naperville

State

IL

Zip Code

60564

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transportation Se-  
rvices

Occupation

Regional Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.14385

Amount of Each Receipt this Period

10.00

Payroll Deduction

**C.**

Full Name (Last, First, Middle Initial)

Ms. Carolyn D. Havis

Mailing Address 428 N. 19th St.

City

San Jose

State

CA

Zip Code

95112

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Menlo Logistics

Occupation

Sr. Dir. Engineering

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.14126

Amount of Each Receipt this Period

10.00

Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional) .....

30.00

**TOTAL** This Period (last page this line number only) .....



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 66

(check only one)

|   |                              |                              |                             |                             |                             |                             |                             |                             |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Ms. Carolyn D. Havis

Mailing Address 428 N. 19th St.

City

San Jose

State

CA

Zip Code

95112

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Menlo Logistics

Occupation

Sr. Dir. Engineering

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 2 |   | 2 | 0 | 0 | 8 |

Transaction ID: SA11AI.14230

Amount of Each Receipt this Period

10.00

Payroll Deduction

**B.**

Full Name (Last, First, Middle Initial)

Ms. Carolyn D. Havis

Mailing Address 428 N. 19th St.

City

San Jose

State

CA

Zip Code

95112

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Menlo Logistics

Occupation

Sr. Dir. Engineering

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 9 |   | 2 | 0 | 0 | 8 |

Transaction ID: SA11AI.14329

Amount of Each Receipt this Period

10.00

Payroll Deduction

**C.**

Full Name (Last, First, Middle Initial)

Ms. Carolyn D. Havis

Mailing Address 428 N. 19th St.

City

San Jose

State

CA

Zip Code

95112

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Menlo Logistics

Occupation

Sr. Dir. Engineering

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 2 | 6 |   | 2 | 0 | 0 | 8 |

Transaction ID: SA11AI.14428

Amount of Each Receipt this Period

10.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional) .....

30.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 66

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Harold Jackson

Mailing Address 5491 Waterview Ct.

City

Ann Arbor

State

MI

Zip Code

48108

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transportation Se-  
rvices

Occupation

Director Quality Assurance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.14087

Amount of Each Receipt this Period

10.00

Payroll Deduction

**B.**

Full Name (Last, First, Middle Initial)

Harold Jackson

Mailing Address 5491 Waterview Ct.

City

Ann Arbor

State

MI

Zip Code

48108

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transportation Se-  
rvices

Occupation

Director Quality Assurance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 2 / 2 0 0 8

Transaction ID: SA11AI.14191

Amount of Each Receipt this Period

10.00

Payroll Deduction

**C.**

Full Name (Last, First, Middle Initial)

Harold Jackson

Mailing Address 5491 Waterview Ct.

City

Ann Arbor

State

MI

Zip Code

48108

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transportation Se-  
rvices

Occupation

Director Quality Assurance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.14290

Amount of Each Receipt this Period

10.00

Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional) .....

30.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 66

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Harold Jackson

Mailing Address 5491 Waterview Ct.

City

Ann Arbor

State

MI

Zip Code

48108

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transportation Se-  
rvices

Occupation

Director Quality Assurance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.14389

Amount of Each Receipt this Period

10.00

Payroll Deduction

**B.**

Full Name (Last, First, Middle Initial)

Julia Jannausch

Mailing Address 1487 Fieldstone Ct.

City

Ann Arbor

State

MI

Zip Code

48108

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transportation Se-  
rvices

Occupation

VP--HR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.14041

Amount of Each Receipt this Period

10.00

Payroll Deduction

**C.**

Full Name (Last, First, Middle Initial)

Julia Jannausch

Mailing Address 1487 Fieldstone Ct.

City

Ann Arbor

State

MI

Zip Code

48108

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transportation Se-  
rvices

Occupation

VP--HR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 2 / 2 0 0 8

Transaction ID: SA11AI.14145

Amount of Each Receipt this Period

10.00

Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional) .....

30.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 66

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Julia Jannausch

Mailing Address 1487 Fieldstone Ct.

City

Ann Arbor

State

MI

Zip Code

48108

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transportation Se-  
rvices

Occupation  
VP--HR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.14244

Amount of Each Receipt this Period

10.00

Payroll Deduction

**B.**

Full Name (Last, First, Middle Initial)

Julia Jannausch

Mailing Address 1487 Fieldstone Ct.

City

Ann Arbor

State

MI

Zip Code

48108

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transportation Se-  
rvices

Occupation  
VP--HR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.14343

Amount of Each Receipt this Period

10.00

Payroll Deduction

**C.**

Full Name (Last, First, Middle Initial)

Todd Johnson

Mailing Address 3 Belmont Rd.

City

Singapore

State

ZZ

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Menlo Logistics

Occupation  
VP Int'l Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.14123

Amount of Each Receipt this Period

10.00

Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional) .....

30.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 66

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Todd Johnson

Mailing Address 3 Belmont Rd.

City

Singapore

State

ZZ

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Menlo Logistics

Occupation

VP Int'l Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 2 / 2 0 0 8

Transaction ID: SA11AI.14227

Amount of Each Receipt this Period

10.00

Payroll Deduction

**B.**

Full Name (Last, First, Middle Initial)

Todd Johnson

Mailing Address 3 Belmont Rd.

City

Singapore

State

ZZ

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Menlo Logistics

Occupation

VP Int'l Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.14326

Amount of Each Receipt this Period

10.00

Payroll Deduction

**C.**

Full Name (Last, First, Middle Initial)

Todd Johnson

Mailing Address 3 Belmont Rd.

City

Singapore

State

ZZ

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Menlo Logistics

Occupation

VP Int'l Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.14425

Amount of Each Receipt this Period

10.00

Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional) .....

30.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 66

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

William Kennelly

Mailing Address 709 Pimlico Parkway

City

Sleepy Hollow

State

IL

Zip Code

60118

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transportation Se-  
rvices

Occupation

Director--National Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

263.68

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.14090

Amount of Each Receipt this Period

8.24

Payroll Deduction

**B.**

Full Name (Last, First, Middle Initial)

William Kennelly

Mailing Address 709 Pimlico Parkway

City

Sleepy Hollow

State

IL

Zip Code

60118

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transportation Se-  
rvices

Occupation

Director--National Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

271.92

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 2 / 2 0 0 8

Transaction ID: SA11AI.14194

Amount of Each Receipt this Period

8.24

Payroll Deduction

**C.**

Full Name (Last, First, Middle Initial)

William Kennelly

Mailing Address 709 Pimlico Parkway

City

Sleepy Hollow

State

IL

Zip Code

60118

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transportation Se-  
rvices

Occupation

Director--National Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.16

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.14293

Amount of Each Receipt this Period

8.24

Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional) .....

24.72

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 66

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

William Kennelly

Mailing Address 709 Pimlico Parkway

City

Sleepy Hollow

State

IL

Zip Code

60118

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transportation Se-  
rvices

Occupation

Director--National Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.40

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.14392

Amount of Each Receipt this Period

8.24

Payroll Deduction

**B.**

Full Name (Last, First, Middle Initial)

John G. Labrie

Mailing Address 5322 Betheny Circle

City

Superior Township

State

MI

Zip Code

48198

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transportation Sv-  
cs.

Occupation

VP CNF

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.14092

Amount of Each Receipt this Period

10.00

Payroll Deduction

**C.**

Full Name (Last, First, Middle Initial)

John G. Labrie

Mailing Address 5322 Betheny Circle

City

Superior Township

State

MI

Zip Code

48198

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transportation Sv-  
cs.

Occupation

VP CNF

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 2 / 2 0 0 8

Transaction ID: SA11AI.14196

Amount of Each Receipt this Period

10.00

Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional) .....

28.24

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 66

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

John G. Labrie

Mailing Address 5322 Betheny Circle

City

Superior Township

State

MI

Zip Code

48198

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transportation Sv-  
cs.

Occupation  
VP CNF

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.14295

Amount of Each Receipt this Period

10.00

Payroll Deduction

**B.**

Full Name (Last, First, Middle Initial)

John G. Labrie

Mailing Address 5322 Betheny Circle

City

Superior Township

State

MI

Zip Code

48198

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transportation Sv-  
cs.

Occupation  
VP CNF

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.14394

Amount of Each Receipt this Period

10.00

Payroll Deduction

**C.**

Full Name (Last, First, Middle Initial)

Michael B. Leathers

Mailing Address 9059 Northpointe Ridge

City

Brighton

State

MI

Zip Code

48114

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transportation Se-  
rvs.

Occupation  
Dir. Employee Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.14093

Amount of Each Receipt this Period

10.00

Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional) .....

30.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 66

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Michael B. Leathers

Mailing Address 9059 Northpointe Ridge

City State Zip Code  
 Brighton MI 48114

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Con-Way Transportation Se-  
rvs.

Occupation  
Dir. Employee Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 1 2 / 2 0 0 8

Transaction ID: SA11AI.14197

Amount of Each Receipt this Period

10.00

Payroll Deduction

**B.**

Full Name (Last, First, Middle Initial)

Michael B. Leathers

Mailing Address 9059 Northpointe Ridge

City State Zip Code  
 Brighton MI 48114

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Con-Way Transportation Se-  
rvs.

Occupation  
Dir. Employee Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.14296

Amount of Each Receipt this Period

10.00

Payroll Deduction

**C.**

Full Name (Last, First, Middle Initial)

Michael B. Leathers

Mailing Address 9059 Northpointe Ridge

City State Zip Code  
 Brighton MI 48114

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Con-Way Transportation Se-  
rvs.

Occupation  
Dir. Employee Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.14395

Amount of Each Receipt this Period

10.00

Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional) .....

30.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 34 / 66

(check only one)

|   |                              |                              |                             |                             |                             |                             |                             |                             |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

William C. Litty, Jr.

Mailing Address 913 Victoria Court

City

Downtown

State

PA

Zip Code

19335

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transportation Sr-  
vcs

Occupation

VP Sales-Eastern

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 5 |   | 2 | 0 | 0 | 8 |

Transaction ID: SA11AI.14094

Amount of Each Receipt this Period

20.00

Payroll Deduction

**B.**

Full Name (Last, First, Middle Initial)

William C. Litty, Jr.

Mailing Address 913 Victoria Court

City

Downtown

State

PA

Zip Code

19335

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transportation Sr-  
vcs

Occupation

VP Sales-Eastern

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

660.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 2 |   | 2 | 0 | 0 | 8 |

Transaction ID: SA11AI.14198

Amount of Each Receipt this Period

20.00

Payroll Deduction

**C.**

Full Name (Last, First, Middle Initial)

William C. Litty, Jr.

Mailing Address 913 Victoria Court

City

Downtown

State

PA

Zip Code

19335

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transportation Sr-  
vcs

Occupation

VP Sales-Eastern

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

680.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 9 |   | 2 | 0 | 0 | 8 |

Transaction ID: SA11AI.14297

Amount of Each Receipt this Period

20.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional) .....

60.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 / 66

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

William C. Litty, Jr.

Mailing Address 913 Victoria Court

City

Downtown

State

PA

Zip Code

19335

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transportation Sr-  
vcs

Occupation

VP Sales-Eastern

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.14396

Amount of Each Receipt this Period

20.00

Payroll Deduction

B.

Full Name (Last, First, Middle Initial)

Mr. Richard J. Lunardi

Mailing Address 8 Bennington Court

City

San Mateo

State

CA

Zip Code

94402

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transp. Services

Occupation

VP Strategic Planning

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.14036

Amount of Each Receipt this Period

10.00

Payroll Deduction

C.

Full Name (Last, First, Middle Initial)

Mr. Richard J. Lunardi

Mailing Address 8 Bennington Court

City

San Mateo

State

CA

Zip Code

94402

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transp. Services

Occupation

VP Strategic Planning

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 2 / 2 0 0 8

Transaction ID: SA11AI.14140

Amount of Each Receipt this Period

10.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional) .....

40.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 / 66

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Mr. Richard J. Lunardi

Mailing Address 8 Bennington Court

City

San Mateo

State

CA

Zip Code

94402

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transp. Services

Occupation

VP Strategic Planning

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.14239

Amount of Each Receipt this Period

10.00

Payroll Deduction

**B.**

Full Name (Last, First, Middle Initial)

Mr. Richard J. Lunardi

Mailing Address 8 Bennington Court

City

San Mateo

State

CA

Zip Code

94402

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transp. Services

Occupation

VP Strategic Planning

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.14338

Amount of Each Receipt this Period

10.00

Payroll Deduction

**C.**

Full Name (Last, First, Middle Initial)

Leslie Lundberg

Mailing Address 364 Devonshire Blvd.

City

San Carlos

State

CA

Zip Code

94070

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CNF

Occupation

VP Human Resources

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.14045

Amount of Each Receipt this Period

10.00

Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional) .....

30.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 37 / 66

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Leslie Lundberg

Mailing Address 364 Devonshire Blvd.

City

San Carlos

State

CA

Zip Code

94070

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CNF

Occupation

VP Human Resources

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 2 / 2 0 0 8

Transaction ID: SA11AI.14149

Amount of Each Receipt this Period

10.00

Payroll Deduction

**B.**

Full Name (Last, First, Middle Initial)

Leslie Lundberg

Mailing Address 364 Devonshire Blvd.

City

San Carlos

State

CA

Zip Code

94070

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CNF

Occupation

VP Human Resources

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.14248

Amount of Each Receipt this Period

10.00

Payroll Deduction

**C.**

Full Name (Last, First, Middle Initial)

Leslie Lundberg

Mailing Address 364 Devonshire Blvd.

City

San Carlos

State

CA

Zip Code

94070

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CNF

Occupation

VP Human Resources

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.14347

Amount of Each Receipt this Period

10.00

Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional) .....

30.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 38 / 66

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Lawrence Maloney

Mailing Address 35602 Livingston Dr

City

Avon

State

OH

Zip Code

44011

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Menlo Worldwide

Occupation

VP Consulting

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.14130

Amount of Each Receipt this Period

10.00

Payroll Deduction

**B.**

Full Name (Last, First, Middle Initial)

Lawrence Maloney

Mailing Address 35602 Livingston Dr

City

Avon

State

OH

Zip Code

44011

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Menlo Worldwide

Occupation

VP Consulting

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 2 / 2 0 0 8

Transaction ID: SA11AI.14234

Amount of Each Receipt this Period

10.00

Payroll Deduction

**C.**

Full Name (Last, First, Middle Initial)

Lawrence Maloney

Mailing Address 35602 Livingston Dr

City

Avon

State

OH

Zip Code

44011

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Menlo Worldwide

Occupation

VP Consulting

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.14333

Amount of Each Receipt this Period

10.00

Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional) .....

30.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 / 66

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Lawrence Maloney

Mailing Address 35602 Livingston Dr

City

Avon

State

OH

Zip Code

44011

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Menlo Worldwide

Occupation

VP Consulting

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.14432

Amount of Each Receipt this Period

10.00

Payroll Deduction

**B.**

Full Name (Last, First, Middle Initial)

David L. Miller

Mailing Address 740 Greystone

City

Chelsea

State

MI

Zip Code

48118

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CWC

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3048.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.14097

Amount of Each Receipt this Period

96.00

Payroll Deduction

**C.**

Full Name (Last, First, Middle Initial)

David L. Miller

Mailing Address 740 Greystone

City

Chelsea

State

MI

Zip Code

48118

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CWC

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3144.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 2 / 2 0 0 8

Transaction ID: SA11AI.14201

Amount of Each Receipt this Period

96.00

Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional) .....

202.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 40 / 66

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

David L. Miller

Mailing Address 740 Greystone

City

Chelsea

State

MI

Zip Code

48118

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CWC

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.14300

Amount of Each Receipt this Period

96.00

Payroll Deduction

**B.**

Full Name (Last, First, Middle Initial)

David L. Miller

Mailing Address 740 Greystone

City

Chelsea

State

MI

Zip Code

48118

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CWC

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3336.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.14399

Amount of Each Receipt this Period

96.00

Payroll Deduction

**C.**

Full Name (Last, First, Middle Initial)

Bruce A. Moss

Mailing Address 9263 Baron Way

City

Saline

State

MI

Zip Code

48176

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Central Express

Occupation  
VP Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.14098

Amount of Each Receipt this Period

25.00

Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional) .....

217.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 41 / 66

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Bruce A. Moss

Mailing Address 9263 Baron Way

City

Saline

State

MI

Zip Code

48176

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Central Express

Occupation  
VP Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

825.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 2 / 2 0 0 8

Transaction ID: SA11AI.14202

Amount of Each Receipt this Period

25.00

Payroll Deduction

**B.**

Full Name (Last, First, Middle Initial)

Bruce A. Moss

Mailing Address 9263 Baron Way

City

Saline

State

MI

Zip Code

48176

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Central Express

Occupation  
VP Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.14301

Amount of Each Receipt this Period

25.00

Payroll Deduction

**C.**

Full Name (Last, First, Middle Initial)

Bruce A. Moss

Mailing Address 9263 Baron Way

City

Saline

State

MI

Zip Code

48176

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Central Express

Occupation  
VP Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

875.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.14400

Amount of Each Receipt this Period

25.00

Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional) .....

75.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 / 66

(check only one)

|   |                              |                              |                             |                             |                             |                             |                             |                             |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Charles R. Mullett

Mailing Address 301 Archer Ct.

City

Beryville

State

VA

Zip Code

22611

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CNF Inc.

Occupation

Director, Govt. Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 5 |   | 2 | 0 | 0 | 8 |

Transaction ID: SA11AI.14037

Amount of Each Receipt this Period

20.00

Payroll Deduction

**B.**

Full Name (Last, First, Middle Initial)

Charles R. Mullett

Mailing Address 301 Archer Ct.

City

Beryville

State

VA

Zip Code

22611

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CNF Inc.

Occupation

Director, Govt. Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 2 |   | 2 | 0 | 0 | 8 |

Transaction ID: SA11AI.14141

Amount of Each Receipt this Period

20.00

Payroll Deduction

**C.**

Full Name (Last, First, Middle Initial)

Charles R. Mullett

Mailing Address 301 Archer Ct.

City

Beryville

State

VA

Zip Code

22611

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CNF Inc.

Occupation

Director, Govt. Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 9 |   | 2 | 0 | 0 | 8 |

Transaction ID: SA11AI.14240

Amount of Each Receipt this Period

20.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional) .....

60.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 43 / 66

(check only one)

|   |                              |                              |                             |                             |                             |                             |                             |                             |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Charles R. Mullett

Mailing Address 301 Archer Ct.

City

Beryville

State

VA

Zip Code

22611

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CNF Inc.

Occupation

Director, Govt. Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 | / | 2 | 6 | / | 2 | 0 | 0 | 8 |

Transaction ID: SA11AI.14339

Amount of Each Receipt this Period

20.00

Payroll Deduction

**B.**

Full Name (Last, First, Middle Initial)

Mr. Thomas Nightingale

Mailing Address 5157 Polo Fields Dr.

City

Ann Arbor

State

MI

Zip Code

48103

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CNF

Occupation

VP Communications &amp; CMO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 | / | 0 | 5 | / | 2 | 0 | 0 | 8 |

Transaction ID: SA11AI.14034

Amount of Each Receipt this Period

25.00

Payroll Deduction

**C.**

Full Name (Last, First, Middle Initial)

Mr. Thomas Nightingale

Mailing Address 5157 Polo Fields Dr.

City

Ann Arbor

State

MI

Zip Code

48103

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CNF

Occupation

VP Communications &amp; CMO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

825.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 | / | 1 | 2 | / | 2 | 0 | 0 | 8 |

Transaction ID: SA11AI.14138

Amount of Each Receipt this Period

25.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional) .....

70.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 44 / 66

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Mr. Thomas Nightingale

Mailing Address 5157 Polo Fields Dr.

City

Ann Arbor

State

MI

Zip Code

48103

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CNF

Occupation

VP Communications & CMO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.14237

Amount of Each Receipt this Period

25.00

Payroll Deduction

**B.**

Full Name (Last, First, Middle Initial)

Mr. Thomas Nightingale

Mailing Address 5157 Polo Fields Dr.

City

Ann Arbor

State

MI

Zip Code

48103

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CNF

Occupation

VP Communications & CMO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

875.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.14336

Amount of Each Receipt this Period

25.00

Payroll Deduction

**C.**

Full Name (Last, First, Middle Initial)

Mr. Anthony S. Oliverio

Mailing Address 2307 SE 188th Ave.

City

Vancouver

State

WV

Zip Code

98683

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Menlo Logistics

Occupation

Senior Dir. Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.14125

Amount of Each Receipt this Period

15.00

Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional) .....

65.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 / 66

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Mr. Anthony S. Oliverio

Mailing Address 2307 SE 188th Ave.

City

Vancouver

State

WV

Zip Code

98683

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Menlo Logistics

Occupation

Senior Dir. Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

435.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 2 / 2 0 0 8

Transaction ID: SA11AI.14229

Amount of Each Receipt this Period

15.00

Payroll Deduction

**B.**

Full Name (Last, First, Middle Initial)

Mr. Anthony S. Oliverio

Mailing Address 2307 SE 188th Ave.

City

Vancouver

State

WV

Zip Code

98683

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Menlo Logistics

Occupation

Senior Dir. Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.14328

Amount of Each Receipt this Period

15.00

Payroll Deduction

**C.**

Full Name (Last, First, Middle Initial)

Mr. Anthony S. Oliverio

Mailing Address 2307 SE 188th Ave.

City

Vancouver

State

WV

Zip Code

98683

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Menlo Logistics

Occupation

Senior Dir. Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

465.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.14427

Amount of Each Receipt this Period

15.00

Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional) .....

45.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 46 / 66

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Mr. Danny D. Pence

Mailing Address 3660 N. Washington

City

Danville

State

IN

Zip Code

46122

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transportation Sv-  
cs.

Occupation

Mgr. Region

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.14100

Amount of Each Receipt this Period

10.00

Payroll Deduction

**B.**

Full Name (Last, First, Middle Initial)

Mr. Danny D. Pence

Mailing Address 3660 N. Washington

City

Danville

State

IN

Zip Code

46122

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transportation Sv-  
cs.

Occupation

Mgr. Region

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 2 / 2 0 0 8

Transaction ID: SA11AI.14204

Amount of Each Receipt this Period

10.00

Payroll Deduction

**C.**

Full Name (Last, First, Middle Initial)

Mr. Danny D. Pence

Mailing Address 3660 N. Washington

City

Danville

State

IN

Zip Code

46122

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transportation Sv-  
cs.

Occupation

Mgr. Region

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.14303

Amount of Each Receipt this Period

10.00

Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional) .....

30.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 47 / 66

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Mr. Danny D. Pence

Mailing Address 3660 N. Washington

City

Danville

State

IN

Zip Code

46122

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transportation Sv-  
cs.

Occupation

Mgr. Region

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.14402

Amount of Each Receipt this Period

10.00

Payroll Deduction

**B.**

Full Name (Last, First, Middle Initial)

Jennifer Rosenfeld- Pileggi

Mailing Address 3852 Jefferson Avenue

City

Redwood City

State

CA

Zip Code

94062

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CNF

Occupation

Sr. VP, Gen. Counsel/Sec.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.14040

Amount of Each Receipt this Period

10.00

Payroll Deduction

**C.**

Full Name (Last, First, Middle Initial)

Jennifer Rosenfeld- Pileggi

Mailing Address 3852 Jefferson Avenue

City

Redwood City

State

CA

Zip Code

94062

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CNF

Occupation

Sr. VP, Gen. Counsel/Sec.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 2 / 2 0 0 8

Transaction ID: SA11AI.14144

Amount of Each Receipt this Period

10.00

Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional) .....

30.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 48 / 66

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Jennifer Rosenfeld- Pileggi

Mailing Address 3852 Jefferson Avenue

City

Redwood City

State

CA

Zip Code

94062

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CNF

Occupation

Sr. VP, Gen. Counsel/Sec.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.14243

Amount of Each Receipt this Period

10.00

Payroll Deduction

**B.**

Full Name (Last, First, Middle Initial)

Jennifer Rosenfeld- Pileggi

Mailing Address 3852 Jefferson Avenue

City

Redwood City

State

CA

Zip Code

94062

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CNF

Occupation

Sr. VP, Gen. Counsel/Sec.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.14342

Amount of Each Receipt this Period

10.00

Payroll Deduction

**C.**

Full Name (Last, First, Middle Initial)

Lynn Reinbolt

Mailing Address 129 Charles Thomas Blvd.

City

Searcy

State

AR

Zip Code

72143

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Road Systems

Occupation

General Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

740.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.14131

Amount of Each Receipt this Period

25.00

Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional) .....

45.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 49 / 66

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Lynn Reinbolt

Mailing Address 129 Charles Thomas Blvd.

City

State

Zip Code

Searcy

AR

72143

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Road Systems

Occupation

General Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

765.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 2 / 2 0 0 8

Transaction ID: SA11AI.14235

Amount of Each Receipt this Period

25.00

Payroll Deduction

**B.**

Full Name (Last, First, Middle Initial)

Lynn Reinbolt

Mailing Address 129 Charles Thomas Blvd.

City

State

Zip Code

Searcy

AR

72143

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Road Systems

Occupation

General Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

790.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.14334

Amount of Each Receipt this Period

25.00

Payroll Deduction

**C.**

Full Name (Last, First, Middle Initial)

Lynn Reinbolt

Mailing Address 129 Charles Thomas Blvd.

City

State

Zip Code

Searcy

AR

72143

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Road Systems

Occupation

General Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

815.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.14433

Amount of Each Receipt this Period

25.00

Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional) .....

75.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 50 / 66

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Mr. James T. Riordan

Mailing Address 1174 W. Russell Road

City

Tecumseh

State

MI

Zip Code

49286

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transportation Se-  
rvices

Occupation

Dir. Human Resources

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.14039

Amount of Each Receipt this Period

20.00

Payroll Deduction

**B.**

Full Name (Last, First, Middle Initial)

Mr. James T. Riordan

Mailing Address 1174 W. Russell Road

City

Tecumseh

State

MI

Zip Code

49286

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transportation Se-  
rvices

Occupation

Dir. Human Resources

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

580.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 2 / 2 0 0 8

Transaction ID: SA11AI.14143

Amount of Each Receipt this Period

20.00

Payroll Deduction

**C.**

Full Name (Last, First, Middle Initial)

Mr. James T. Riordan

Mailing Address 1174 W. Russell Road

City

Tecumseh

State

MI

Zip Code

49286

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transportation Se-  
rvices

Occupation

Dir. Human Resources

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.14242

Amount of Each Receipt this Period

20.00

Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional) .....

60.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 51 / 66

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Mr. James T. Riordan

Mailing Address 1174 W. Russell Road

City

Tecumseh

State

MI

Zip Code

49286

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transportation Se-  
vice

Occupation

Dir. Human Resources

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

620.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.14341

Amount of Each Receipt this Period

20.00

Payroll Deduction

**B.**

Full Name (Last, First, Middle Initial)

Mr. William J. Rzepecki

Mailing Address 3163 W. Feliciano Way

City

Tucson

State

AZ

Zip Code

85742

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transportation Sv-  
cs.

Occupation

Mgr. Service Center 3

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.14103

Amount of Each Receipt this Period

15.00

Payroll Deduction

**C.**

Full Name (Last, First, Middle Initial)

Mr. William J. Rzepecki

Mailing Address 3163 W. Feliciano Way

City

Tucson

State

AZ

Zip Code

85742

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transportation Sv-  
cs.

Occupation

Mgr. Service Center 3

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 2 / 2 0 0 8

Transaction ID: SA11AI.14207

Amount of Each Receipt this Period

15.00

Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional) .....

50.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 52 / 66

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Mr. William J. Rzepecki

Mailing Address 3163 W. Feliciano Way

City

Tucson

State

AZ

Zip Code

85742

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transportation Sv-  
cs.

Occupation

Mgr. Service Center 3

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

490.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.14306

Amount of Each Receipt this Period

15.00

Payroll Deduction

**B.**

Full Name (Last, First, Middle Initial)

Mr. William J. Rzepecki

Mailing Address 3163 W. Feliciano Way

City

Tucson

State

AZ

Zip Code

85742

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transportation Sv-  
cs.

Occupation

Mgr. Service Center 3

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

505.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.14405

Amount of Each Receipt this Period

15.00

Payroll Deduction

**C.**

Full Name (Last, First, Middle Initial)

Mr. Herbert J. Schmidt

Mailing Address 4527 Goldfinch Rd.

City

Joplin

State

MO

Zip Code

64804

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transportation

Occupation

Sr. Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.14046

Amount of Each Receipt this Period

28.00

Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional) .....

58.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 53 / 66

(check only one)

|   |                              |                              |                             |                             |                             |                             |                             |                             |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Mr. Herbert J. Schmidt

Mailing Address 4527 Goldfinch Rd.

City

Joplin

State

MO

Zip Code

64804

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transportation

Occupation

Sr. Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 2 |   | 2 | 0 | 0 | 8 |

Transaction ID: SA11AI.14150

Amount of Each Receipt this Period

28.00

Payroll Deduction

**B.**

Full Name (Last, First, Middle Initial)

Mr. Herbert J. Schmidt

Mailing Address 4527 Goldfinch Rd.

City

Joplin

State

MO

Zip Code

64804

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transportation

Occupation

Sr. Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 9 |   | 2 | 0 | 0 | 8 |

Transaction ID: SA11AI.14249

Amount of Each Receipt this Period

28.00

Payroll Deduction

**C.**

Full Name (Last, First, Middle Initial)

Mr. Herbert J. Schmidt

Mailing Address 4527 Goldfinch Rd.

City

Joplin

State

MO

Zip Code

64804

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transportation

Occupation

Sr. Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 2 | 6 |   | 2 | 0 | 0 | 8 |

Transaction ID: SA11AI.14348

Amount of Each Receipt this Period

28.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional) .....

84.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 54 / 66

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Neil E. Smith, Jr.

Mailing Address 27166 Corcubion

City

Mission Viejo

State

CA

Zip Code

92692

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transportation

Occupation

VP Ops-Western

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1920.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.14108

Amount of Each Receipt this Period

60.00

Payroll Deduction

**B.**

Full Name (Last, First, Middle Initial)

Neil E. Smith, Jr.

Mailing Address 27166 Corcubion

City

Mission Viejo

State

CA

Zip Code

92692

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transportation

Occupation

VP Ops-Western

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1980.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 2 / 2 0 0 8

Transaction ID: SA11AI.14212

Amount of Each Receipt this Period

60.00

Payroll Deduction

**C.**

Full Name (Last, First, Middle Initial)

Neil E. Smith, Jr.

Mailing Address 27166 Corcubion

City

Mission Viejo

State

CA

Zip Code

92692

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transportation

Occupation

VP Ops-Western

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2040.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.14311

Amount of Each Receipt this Period

60.00

Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional) .....

180.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 55 / 66

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Neil E. Smith, Jr.

Mailing Address 27166 Corcubion

City

Mission Viejo

State

CA

Zip Code

92692

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transportation

Occupation

VP Ops-Western

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.14410

Amount of Each Receipt this Period

60.00

Payroll Deduction

**B.**

Full Name (Last, First, Middle Initial)

Douglas Stotlar

Mailing Address 5333 Pleasant Lake Rd.

City

Ann Arbor

State

MI

Zip Code

48103

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transportation Sv-  
cs.

Occupation

President & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.14042

Amount of Each Receipt this Period

50.00

Payroll Deduction

**C.**

Full Name (Last, First, Middle Initial)

Douglas Stotlar

Mailing Address 5333 Pleasant Lake Rd.

City

Ann Arbor

State

MI

Zip Code

48103

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transportation Sv-  
cs.

Occupation

President & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1650.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 2 / 2 0 0 8

Transaction ID: SA11AI.14146

Amount of Each Receipt this Period

50.00

Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional) .....

160.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 56 / 66

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Douglas Stotlar

Mailing Address 5333 Pleasant Lake Rd.

City

Ann Arbor

State

MI

Zip Code

48103

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transportation Sv-  
cs.

Occupation

President & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1700.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.14245

Amount of Each Receipt this Period

50.00

Payroll Deduction

**B.**

Full Name (Last, First, Middle Initial)

Douglas Stotlar

Mailing Address 5333 Pleasant Lake Rd.

City

Ann Arbor

State

MI

Zip Code

48103

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transportation Sv-  
cs.

Occupation

President & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1750.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.14344

Amount of Each Receipt this Period

50.00

Payroll Deduction

**C.**

Full Name (Last, First, Middle Initial)

Mark Thickpenny

Mailing Address 210 View St.

City

Mountain View

State

CA

Zip Code

94041-1984

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way

Occupation

VP Treasurer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.14043

Amount of Each Receipt this Period

10.00

Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional) .....

110.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 57 / 66

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Mark Thickpenny

Mailing Address 210 View St.

City

Mountain View

State

CA

Zip Code

94041-1984

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way

Occupation

VP Treasurer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 2 / 2 0 0 8

Transaction ID: SA11AI.14147

Amount of Each Receipt this Period

10.00

Payroll Deduction

**B.**

Full Name (Last, First, Middle Initial)

Mark Thickpenny

Mailing Address 210 View St.

City

Mountain View

State

CA

Zip Code

94041-1984

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way

Occupation

VP Treasurer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.14246

Amount of Each Receipt this Period

10.00

Payroll Deduction

**C.**

Full Name (Last, First, Middle Initial)

Mark Thickpenny

Mailing Address 210 View St.

City

Mountain View

State

CA

Zip Code

94041-1984

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way

Occupation

VP Treasurer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.14345

Amount of Each Receipt this Period

10.00

Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional) .....

30.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 58 / 66

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

E. Joseph Tillman

Mailing Address 222 8th Avenue  
Apt. 208

City State Zip Code  
San Mateo CA 94401

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Vector SCM

Occupation  
VP Finance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.14128

Amount of Each Receipt this Period

10.00

Payroll Deduction

**B.**

Full Name (Last, First, Middle Initial)

E. Joseph Tillman

Mailing Address 222 8th Avenue  
Apt. 208

City State Zip Code  
San Mateo CA 94401

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Vector SCM

Occupation  
VP Finance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 2 / 2 0 0 8

Transaction ID: SA11AI.14232

Amount of Each Receipt this Period

10.00

Payroll Deduction

**C.**

Full Name (Last, First, Middle Initial)

E. Joseph Tillman

Mailing Address 222 8th Avenue  
Apt. 208

City State Zip Code  
San Mateo CA 94401

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Vector SCM

Occupation  
VP Finance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.14331

Amount of Each Receipt this Period

10.00

Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional) .....

30.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 59 / 66

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

E. Joseph Tillman

Mailing Address 222 8th Avenue  
Apt. 208

City State Zip Code  
San Mateo CA 94401

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Vector SCM

Occupation  
VP Finance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.14430

Amount of Each Receipt this Period

10.00

Payroll Deduction

**B.**

Full Name (Last, First, Middle Initial)

Mr. Richard D. Trott

Mailing Address 1681 Waterside Ct.

City State Zip Code  
Ann Arbor MI 48108

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Con-Way Transp. Services

Occupation  
VP Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.14112

Amount of Each Receipt this Period

20.00

Payroll Deduction

**C.**

Full Name (Last, First, Middle Initial)

Mr. Richard D. Trott

Mailing Address 1681 Waterside Ct.

City State Zip Code  
Ann Arbor MI 48108

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Con-Way Transp. Services

Occupation  
VP Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

660.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 2 / 2 0 0 8

Transaction ID: SA11AI.14216

Amount of Each Receipt this Period

20.00

Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional) .....

50.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 60 / 66

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Mr. Richard D. Trott

Mailing Address 1681 Waterside Ct.

City

Ann Arbor

State

MI

Zip Code

48108

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transp. Services

Occupation

VP Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

680.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.14315

Amount of Each Receipt this Period

20.00

Payroll Deduction

**B.**

Full Name (Last, First, Middle Initial)

Mr. Richard D. Trott

Mailing Address 1681 Waterside Ct.

City

Ann Arbor

State

MI

Zip Code

48108

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transp. Services

Occupation

VP Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.14414

Amount of Each Receipt this Period

20.00

Payroll Deduction

**C.**

Full Name (Last, First, Middle Initial)

Arthur W. Waggoner

Mailing Address 6417 Remington Parkway

City

Colleyville

State

TX

Zip Code

76034

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transportation

Occupation

Mgr. Region

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.14114

Amount of Each Receipt this Period

10.00

Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional) .....

50.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 61 / 66

(check only one)

|   |                              |                              |                             |                             |                             |                             |                             |                             |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Arthur W. Waggoner

Mailing Address 6417 Remington Parkway

City

Colleyville

State

TX

Zip Code

76034

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transportation

Occupation

Mgr. Region

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 | / | 1 | 2 | / | 2 | 0 | 0 | 8 |

Transaction ID: SA11AI.14218

Amount of Each Receipt this Period

10.00

Payroll Deduction

**B.**

Full Name (Last, First, Middle Initial)

Arthur W. Waggoner

Mailing Address 6417 Remington Parkway

City

Colleyville

State

TX

Zip Code

76034

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transportation

Occupation

Mgr. Region

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 | / | 1 | 9 | / | 2 | 0 | 0 | 8 |

Transaction ID: SA11AI.14317

Amount of Each Receipt this Period

10.00

Payroll Deduction

**C.**

Full Name (Last, First, Middle Initial)

Arthur W. Waggoner

Mailing Address 6417 Remington Parkway

City

Colleyville

State

TX

Zip Code

76034

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transportation

Occupation

Mgr. Region

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 | / | 2 | 6 | / | 2 | 0 | 0 | 8 |

Transaction ID: SA11AI.14416

Amount of Each Receipt this Period

10.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional) .....

30.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 62 / 66

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

James P. Worthington

Mailing Address 701 Barbara Lane

City

Keller

State

TX

Zip Code

76248-2802

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transportation Se-  
vice

Occupation

President CSE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1280.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.14118

Amount of Each Receipt this Period

40.00

Payroll Deduction

**B.**

Full Name (Last, First, Middle Initial)

James P. Worthington

Mailing Address 701 Barbara Lane

City

Keller

State

TX

Zip Code

76248-2802

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transportation Se-  
vice

Occupation

President CSE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1320.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 2 / 2 0 0 8

Transaction ID: SA11AI.14222

Amount of Each Receipt this Period

40.00

Payroll Deduction

**C.**

Full Name (Last, First, Middle Initial)

James P. Worthington

Mailing Address 701 Barbara Lane

City

Keller

State

TX

Zip Code

76248-2802

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transportation Se-  
vice

Occupation

President CSE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1360.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.14321

Amount of Each Receipt this Period

40.00

Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional) .....

120.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 63 / 66

(check only one)

|   |                              |                              |                             |                             |                             |                             |                             |                             |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

James P. Worthington

Mailing Address 701 Barbara Lane

City

Keller

State

TX

Zip Code

76248-2802

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transportation Se-  
vice

Occupation

President CSE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1400.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 2 | 6 |   | 2 | 0 | 0 | 8 |

Transaction ID: SA11AI.14420

Amount of Each Receipt this Period

40.00

Payroll Deduction

**B.**

Full Name (Last, First, Middle Initial)

Dean Wright

Mailing Address P.O. Box 2062

City

Menlo Park

State

CA

Zip Code

94026

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CNF Inc.

Occupation

Mgr. Equipment Admin

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 5 |   | 2 | 0 | 0 | 8 |

Transaction ID: SA11AI.14044

Amount of Each Receipt this Period

20.00

Payroll Deduction

**C.**

Full Name (Last, First, Middle Initial)

Dean Wright

Mailing Address P.O. Box 2062

City

Menlo Park

State

CA

Zip Code

94026

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CNF Inc.

Occupation

Mgr. Equipment Admin

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

660.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 2 |   | 2 | 0 | 0 | 8 |

Transaction ID: SA11AI.14148

Amount of Each Receipt this Period

20.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional) .....

80.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 64 / 66

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Dean Wright

Mailing Address P.O. Box 2062

City

Menlo Park

State

CA

Zip Code

94026

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CNF Inc.

Occupation

Mgr. Equipment Admin

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

680.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.14247

Amount of Each Receipt this Period

20.00

Payroll Deduction

**B.**

Full Name (Last, First, Middle Initial)

Dean Wright

Mailing Address P.O. Box 2062

City

Menlo Park

State

CA

Zip Code

94026

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CNF Inc.

Occupation

Mgr. Equipment Admin

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.14346

Amount of Each Receipt this Period

20.00

Payroll Deduction

**C.**

Full Name (Last, First, Middle Initial)

Mr. Michael D. Yuenger

Mailing Address 7448 Black Forest Dr.

City

Dexter

State

MI

Zip Code

48130

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Con-Way Transp. Services

Occupation

VP/Controller

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.14119

Amount of Each Receipt this Period

20.00

Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional) .....

60.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 65 / 66

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Mr. Michael D. Yuenger

Mailing Address 7448 Black Forest Dr.

City State Zip Code  
 Dexter MI 48130

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Con-Way Transp. Services

Occupation  
VP/Controller

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

660.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 1 2 / 2 0 0 8

Transaction ID: SA11AI.14223

Amount of Each Receipt this Period

20.00

Payroll Deduction

**B.**

Full Name (Last, First, Middle Initial)

Mr. Michael D. Yuenger

Mailing Address 7448 Black Forest Dr.

City State Zip Code  
 Dexter MI 48130

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Con-Way Transp. Services

Occupation  
VP/Controller

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

680.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.14322

Amount of Each Receipt this Period

20.00

Payroll Deduction

**C.**

Full Name (Last, First, Middle Initial)

Mr. Michael D. Yuenger

Mailing Address 7448 Black Forest Dr.

City State Zip Code  
 Dexter MI 48130

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Con-Way Transp. Services

Occupation  
VP/Controller

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.14421

Amount of Each Receipt this Period

20.00

Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional) .....

60.00

**TOTAL** This Period (last page this line number only) .....

3427.28

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 66 / 66

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

COLLINS FOR SENATOR

Mailing Address PO BOX 1096

City  
BANGOR

State  
ME

Zip Code  
04402

Purpose of Disbursement  
Contribution

Candidate Name  
SUSAN M COLLINS

011  
Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

State: ME District: 00

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.14537

Date of Disbursement

07 / 31 / 2008

Amount of Each Disbursement this Period

2000.00

**B.**

Full Name (Last, First, Middle Initial)

TEAM SUNUNU

Mailing Address PO BOX 500

City  
RYE

State  
NH

Zip Code  
03870

Purpose of Disbursement  
Contribution

Candidate Name  
JOHN E SUNUNU

011  
Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

State: NH District: 00

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.14534

Date of Disbursement

07 / 10 / 2008

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3000.00

**TOTAL** This Period (last page this line number only) .....

3000.00